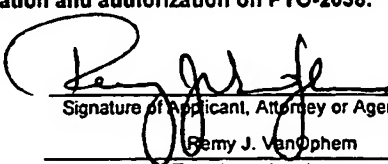


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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) FTP163R US	
Claims as Filed – Part 1							
	(1) Claims in Patent	(2) Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	(A) 20	(B) 20	----	=	x \$ _____ =		x \$ _____ =
Independent claims (37 CFR 1.16(i))	(C) 3	(D) 3	.	=	x \$ _____ =		x \$ _____ =
				Basic Fee (37 CFR 1.16(h))		\$ _____	\$ 770
				Total Filing Fee		\$ _____	OR \$ 770.00
Claims as Amended – Part 2							
	(1) Claims Remaining After Amendment	(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	--- 26	MINUS	** 20	=	6	x \$ 18 =	108
Independent Claims (37 CFR 1.16(i))	--- 5	MINUS	**** 3	=	2	x \$ 86 =	172
				Total Additional Fee		\$ _____	OR \$ 280.00
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B – A); if "A" is 20 or less, use (B – 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account Number _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account Number 22-0212. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ 1050.00 _____ to cover the filing/additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p>							
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>							
<p>5/5/04</p> <p>_____ Date</p> <p>27053 _____ Registration Number, if applicable</p>				<p> _____ Signature of Applicant, Attorney or Agent of Record</p> <p>Remy J. VanDyke _____ Typed or printed name</p>			

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PATENT APPLICATION SERIAL NO.

10/840215

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
FEE RECORD SHEET

REISSUE
CASE

1/10/2004 ENHILE1 00000071 10840215

1 FC:1004	770.00 OP
1 FC:1204	172.00 OP
1 FC:1205	108.00 OP

Adjustment date: 07/06/2004 SDIRETA1
15/10/2004 ENHILE1 00000071 10840215
12 FC:1204 -172.00 OP

17/06/2004 SDIRETA1 00000002 10840215

11 FC:1204	86.00 OP
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Repln: Ref: 07/06/2004 SDIRETA1 0014414500
DAN:220212 Name/Number:10840215
FC: 3204 \$86.00 CR -

PTO-1556
(5/87)